J. APPLICATION/REQUEST FOR USE OF THE MEETING ROOM OR CONFERENCE ROOM OF THE MONROE COUNTY PUBLIC LIBRARY SYSTEM

Application form must	be completed before	any program wil	l be scheduled.
Please print or type.			
Room Requested	Loc	ation	
Name of Organization			
Date(s) Requested	Ног	ırs	
Topic, Purpose & Type of Program or Exhibit			
Approximate Length			
Equipment Needed: below)	(please describe physical set-up for room in space provided		
Microphone	Lectern		
Chairs (Number)	Table(s)		
Other	AV Equipment		
Organization Represer	ntative		
Address	Phone	(AM) (PM)	

THIS ORGANIZATION AGREES TO ABIDE BY THE REGULATIONS GOVERNING THE USE OF THE FACILITY, AND BE RESPONSIBLE FOR REPAIR OR REPLACEMENT FOR DAMAGE TO THE ROOM, FURNITURE, OR EQUIPMENT. WE ALSO AGREE TO PERFORM ANY NECESSARY CLEANUP.

Signature

Title

Date

PHYSICAL SET-UP DESCRIPTION: (SET-UP AND BREAKDOWN TO BE DONE BY PERSON OR GROUP REQUESTING ROOM USE)